Va. Code §§8.01-407, 14.1-195, 16.1-265, 19.2-267, and Rule 3A:15 REQUEST FOR WITNESS SUBPOENA CITY OR COUNTY ☐ GENERAL DISTRICT COURT (☐ Civil ☐ Criminal ☐ Traffic) ☐ JUVENILE AND DOMESTIC RELATIONS DISTRICT COURT Please subpoena the witnesses below to appear before the Court on the trial date shown. (See Va. Code §14.1-195 regarding limitations on compensation of subpoenaed witnesses.) WITNESSES (IF MAILING ADDRESS IS RFD, P.O. BOX, ETC., PLEASE INDICATE LOCATION WHERE WITNESS CAN BE FOUND) NAME NAME ADDRESS/LOCATION ADDRESS/LOCATION CITY OR COUNTY CITY OR COUNTY TELEPHONE TELEPHONE NAME NAME ADDRESS/LOCATION ADDRESS/LOCATION CITY OR COUNTY TELEPHONE CITY OR COUNTY TELEPHONE NAME ADDRESS/LOCATION ADDRESS/LOCATION CITY OR COUNTY CITY OR COUNTY TELEPHONE TELEPHONE NAME ADDRESS/LOCATION ADDRESS/LOCATION CITY OR COUNTY TELEPHONE CITY OR COUNTY TELEPHONE NAME NAME ADDRESS/LOCATION ADDRESS/LOCATION

CITY OR COUNTY

TELEPHONE

FORM DC-325 1/80 (114:2-102 4/86)

TELEPHONE

CITY OR COUNTY

FILE NO.	
REQUEST FOR WITNESS	
☐ Commonwealth of Virginia	
☐ CITY ☐ COUNTY ☐ TOWN of	
PLAINTIFF(S)	
In re / v.	
DEFENDANT(S)	
TRIAL DATE AND TIME	
REQUEST ON BEHALF OF Commonwealth City, County or Town	
☐ PLAINTIFF(S) ☐ DEFENDANT(S) ☐ JUVENILE	7
REQUESTED BY: NAME	
SIGNATURE	
COURT USE ONLY	
DATE RECEIVED DATE ISSUED	